| UTAH DNR OIL, GAS & MINING | **Citation for Non-Compliance** **Utah Minerals Regulatory Program** 1594 West North Temple, Salt Lake City, UT 84114 Phone: (801) 538-5340 Fax: (801) 359-3940 | **Citation #:** MC 2008-25-01 **Permit Number:** S019 0064 **Date Issued:** JUNE 12, 2008 |

| ☐ NOTICE OF VIOLATION | ☒ CESSATION ORDER (CO) | ☐ FAILURE TO ABATE CO |

Permittee Name: BLACK GOLD ORGANIC FERTILIZER	Inspector Number and ID: 25
Mine Name: RHAE-RAE	Date and Time of Inspection: 5/9/08 10-11 30 A
Certified Return Receipt Number: 7004 2510 0004 1824 9110	Date and Time of Service: 6/12/08

Nature of condition, practice, or violation: The improper storage of hazardous or potentially hazardous materials on site.

Provisions of Act, regulations, or permit violated:

R647-3-107. OPERATION PRACTICES 4. DELETERIOUS MATERIALS

☒ **This order requires Cessation of ALL mining activities.** (Check box if appropriate.)

☒ Condition, practice, or violation is creating an imminent danger to health or safety of the public.

☐ Permittee/Operator is/has been conducting mining activities without a Permit.

☒ Condition, practice, or violation is causing or can reasonably be expected to cause significant, imminent environmental harm to land, air, or water resources.

☐ Permittee has failed to abate Violation(s) included in ☐ Notice of Violation or ☐ Cessation Order within time for abatement originally fixed or subsequently extended.

☐ **This order requires Cessation of PORTION(S) of mining activities.**

Mining activities to be ceased immediately: ☐ Yes ☐ No   **Abatement Times (if applicable).**

Action(s) required: ☒ Yes ☐ No   Removal of, or proper storage of, all hazardous materials or potentially hazardous materials. All ~~drums~~ of hazardous materials shall be put in a secured building not accessible to the public or removed from the site within 30 days.

| _____ (Print) Permittee Representative | THOMAS MUNSON (Print) DOGM Representative |
| _____ Permittee Representative's Signature - Date | Thomas Munson 06/12/2008 DOGM Representative's Signature - Date |

SEE REVERSE SIDE Of This Form For Instructions And Additional Information

0001